PATENT APPLICATION SER	AL NO.
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## U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

04/26/2004 GWORDOF1 00000060 090458 10709248

01 FC:1001

770.00 DA

PTO-1556 (5/87)

## Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

EFS ID:

59556

Application ID:

10709248

Title of Invention:

structure and method of manufacturing a finFet device

having stacked fins

First Named Inventor:

Huilong Zhu

Domestic/Foreign Application:

**Domestic Application** 

Filing Date:

2004-04-23

Effective Receipt Date:

2004-04-23

Submission Type:

**Utility Patent Filing** 

Filing Type:

new-utility

Confirmation number:

3247

Attorney Docket Number:

FIS920040081US1

Total Fees Authorized:

810.0

Payment Category:

**Deposit Account** 

Deposit Account Number:

90458

Deposit Account Name:

JOSEPH P. ABATE

**RAM Payment Status:** 

RAM has not been processed

Digital Certificate Holder: cn=Joseph P. Abate,ou=Registered Attorneys,ou=Patent and Trademark

Office,ou=Department of Commerce,o=U.S. Government,c=US

Certificate Message Digest: 1aee14b3c1b8a4ed9721cb6551cc0ecd3332e34b

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

							110709248						
CLAIMS AS			S FILED - PART I (Column 1)		(Column 2)			MALL E	NTITY	OR		R THAN ENTITY	
TOTAL CLAIMS			20					RATE	FEE	7	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		SIC FE	385.00	OR	BASIC FE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20= * (		• 9	0		X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			3	ninus 3 =	0			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT								145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	OTAL		OR	TOTAL	770		
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							S	MALL	ENTITY	OR	OTHER		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST SER USLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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	FIRST PRESE	ENTATION OF M	OLIPLE DE	PENDENT	CLAIM		+	145=		OR	+290=		
								TOTAL IT. FEE		OR ,	TOTAL		
		(Column 1)		(Colum	n 2)	(Column 3).							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								45≑		OR	+290=		
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A P	Independent		Minus	***		=	X4	3=		OR	X86=		
1	FIRST PRESEI	NTATION OF MU	ILTIPLE DEF	PENDENT C	LAIM								
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.													
H	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  TOTAL ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												